

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/170,221	10/13/98	375	2734	50100-463

APPLICANT

WILLIAM LO, CUPERTINO, CA.

CONTINUING DOMESTIC DATA***

VERIFIED PROVISIONAL APPLICATION NO. 60/082,183 04/17/98

RMB

371 (NAT'L STAGE) DATA***

VERIFIED

RMB NONE

FOREIGN APPLICATIONS***

VERIFIED

RMB NONE

FOREIGN FILING LICENSE GRANTED 10/27/98

***** SMALL ENTITY *****

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged	<u>RMB</u> Examiner's Initials	Initials	CA	3	19	4

ADDRESS

MCDERMOTT WILL AND EMERY
SUITE 300
99 CANAL CENTER PLAZA
ALEXANDRIA VA 22314

TITLE

APPARATUS AND METHOD FOR SECUREMEDIA INDEPENDENT INTERFACE
COMMUNICATIONS BY CORRUPTING TRANSMIT DATA ON SELECTED REPEATER PORT

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
\$872		

SERIAL NUMBER 09/170,221	FILING DATE 10/13/98	CLASS 375	GROUP ART UNIT 2731	ATTORNEY DOCKET NO. 50100-463
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APPLICANT

WILLIAM LO, CUPERTINO, CA.

****CONTINUING DOMESTIC DATA*******

VERIFIED PROVISIONAL APPLICATION NO. 60/082,183 04/17/98

RMB

****371 (NAT'L STAGE) DATA*******

VERIFIED

RMB NONE

****FOREIGN APPLICATIONS*******

VERIFIED

RMB NONE

FOREIGN FILING LICENSE GRANTED 10/27/98

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 3	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 4
Verified and Acknowledged <u>RMB</u> Examiner's Initials		Initials			

ADDRESS

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SUITE 300
99 CANAL CENTER PLAZA
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TITLE

APPARATUS AND METHOD FOR SECURE MEDIA INDEPENDENT INTERFACE
COMMUNICATIONS BY CORRUPTING TRANSMIT DATA ON SELECTED REPEATER PORT

FILING FEE RECEIVED \$872	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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